

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | HL | | 4-17-01 |
| O.I.P.E. CLASSIFIER | SM | 32 | 5/8 |
| FORMALITY REVIEW | SP | 1027 | 06/05/01 |
| RESPONSE FORMALITY REVIEW | SM | 927 | 10-05-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY

C.C.
 06-04-01
 12/05/01
 10/01